UNITED STATES

SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

TEMPORARY FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB A	PPROVAL
OMB Number:	3235-0076
Expires:	January 31, 2009
Estimated average b	urden
	4,00



				000	04009				
Name of Offering ({ Limited partnershi	check if this is an amendment and name has change interests	ged, and indicate change.)							
	box(es) that apply): [] Rule 504 [] Rule 505 [X New Filing [] Amendment	Rule 506 [] Section 4(6) [] ULOI							
	A. BASI	IC IDENTIFICATION DATA							
1. Enter the informat	tion requested about the issuer	· · · · · · · · · · · · · · · · · · ·							
Name of Issuer ([) c Anasazi Market Ne	heck if this is an amendment and name has changed utral LP	, and indicate change.)		•					
	Offices (Number and Street, City, State, Zip Code) , Suite D202, Santa Fe, NM 87505		Telephone Number (Including Area Code) (505) 989-8170						
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from				Telephone Number (Including Area Code)					
Executive Offices)					PROCESSED				
Brief Description of I	Business	_							
Private investment f	und			14	MAR 2 5 2009				
Type of Business Org	ganization			TL	OMSON REUTERS				
[] corporation [X] limited partnership, already formed [] other (please specify): [] business trust [] limited partnership, to be formed									
	Date of Incorporation or Organization: oration or Organization: (Enter two-letter U.S. Posts CN for Canada: FN for	al Service abbreviation for State:	Month [0 5]	Year [0 6]	[X] Actual [] Estimated				

GENERAL INSTRUCTIONS

Note: This is a special Temporary Form D (17 CFR 239.500T) that is available to be filed instead of Form D (17 CFR 239.500) only to issuers that file with the Commission a notice on Temporary Form D (17 CFR 239.500T) or an amendment to such a notice in paper format on or after September 15, 2008 but before March 16, 2009. During that period, an issuer also may file in paper format an initial notice using Form D (17 CFR 239.500) but, if it does, the issuer must file amendments using Form D (17 CFR 239.500) and otherwise comply with all the requirements of § 230.503T.

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exception under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6). When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 100 F Street, N.E., Washington, D.C. 20549.

Copies Required: Two (2) copies of this notice must be filed with the SEC, one of which must be manually signed. The copy not manually signed must be a photocopy of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	[X] Promoter	[] Beneficial Owner	[] Executive Officer	[] Director	[X] General and/or Managing Partner
Full Name (Last name first, if Santa Fe Partners LLC	individual)	·			
Business or Residence Address 1512 Pacheco Street, Suite D	s (Number and St 202, Santa Fe, N	reet, City, State, Zip Coo M 87505	lc)		
Check Box(es) that Apply:	[] Promoter	[] Beneficial Owner	[X] Executive Officer	[] Director	[] General and/or Managing Partner
Full Name (Last name first, if Leatherberry, James	individual)				
Business or Residence Address 1512 Pacheco Street, Suite D	•		e)		
Check Box(es) that Apply:	[] Promoter	[X] Beneficial Owner	[] Executive Officer	[] Director	[] General and/or Managing Partner
Full Name (Last name first, if i	ndividual)	•			
Business or Residence Address Schottegatweg Oost 44, Cura			e)		
Check Box(es) that Apply:	[] Promoter	[X] Beneficial Owner	[] Executive Officer	[] Director	[] General and/or Managing Partner
Full Name (Last name first, if i Altair Rising Stars LP	ndividual)	····			
Business or Residence Address Kaya Flamboyan 9, Schottegi					
Check Box(es) that Apply:	[] Promoter	[X] Beneficial Owner	[] Executive Officer	[] Director	[] General and/or Managing Partner
Full Name (Last name first, if i Michelson Investments, Inc.	ndividual)				
Business or Residence Address 4646 Los Pablamos Circle, N	•		,		
Check Box(es) that Apply:	[] Promoter	[X] Beneficial Owner	[] Executive Officer	[] Director	[] General and/or Managing Partner
Full Name (Last name first, if in Telesis Constellation	ndividual)			<u>, </u>	· · · · · · · · · · · · · · · · · · ·
Business or Residence Address 4223 Glenco Avenue, Marina			:)		
Check Box(es) that Apply:	[] Promoter	[X] Beneficial Owner	[] Executive Officer	[] Director	[] General and/or Managing Partner
Full Name (Last name first, if ir Ozcar Multi-Strategies LLC	ndividual)				
Business or Residence Address Securities Corp, New York, N	•	et, City, State, Zip Code	*)		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

_					B. IN	FORMA1	TION ABO	OUT OF	FERING				***		
i.	Has the issuer	sold, or does th	ne issuer int	end to sell,	to non-accre	dited invest	ors in this o	ffering?	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					Yes	
					Answer als	o in Append	dix, Columr	2, if filing	under ULC	Œ.					
2.	What is the mi	nimum investr	nent that wi	II be accept	ed from any	individual?		-			*****		9	1,000,0	000*
	*Represents in	itial minimun	n capital co	ntribution									_	•	
_	•	bution of less												Yes	
3.	Does the offer	ng permit join	t ownership	of a single	unit?		•••••••		***************************************		*****************	*************	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	[X]	[]
4.	Enter the infor solicitation of pregistered with of such a broke	ourchasers in c	onnection wor with a sta	vith sales of te or states,	securities in	the offering e of the broi	g. If a perso ker or deale	on to be list r. If more t	ed is an ass	ociated perso	on or agent	of a broker	or dealer		
Fu	ll Name (Last na	me first, if ind	lividual)			la strania D)l	······································		 .					
Bu	siness or Reside	nce Address ()	Number and	Street, City	_	Code)	rokerage S	ystems, Li	LC,						
						ackson Blv	d., Suite 35	10, Chicag	o, IL 60604	<u>.</u>					
Na	me of Associate	d Broker or De	ealer												
Sta	ites in Which Pe	rson Listed Ha	s Solicited	or Intends to	Solicit Pur	chasers							_		
	(Check "All St	ates" or check	individual S	tates)							,,		[J All St	ates
	[AL [IL] [MT [RI	[in] [NE]	[AZ] [IA] [NV] [SD]	(AR) [KS] [NH] [TN]	X [CA] [KY] [NJ] [TX]	X [CO] [LA] [NM] [UT]	[CT] [ME] X [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] X (OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		
Ful	Il Name (Last na			[1		[0,,]	[,,]			()	[]	[,,,,]			
Bu	siness or Reside	nce Address (N	lumber and	Street, City	, State, Zip	Code)	<u>.</u>								
Na	me of Associate	d Broker or De	aler			 .				· <u>-</u>					
Sta	tes in Which Per (Check "All Sta									****	.,	····	[] All St	ates
	fat.	L CAVI	[47]	(AD1	[CA]	(CO)	CTT	(DE)	נוסכיו	(61)	(CA)	an	(III)		
	(AL)	[IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	(DE) (MD)	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]		
	[MT] [RI]	NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	(OR) [WY]	(PA) (PR)		
Ful	l Name (Last na	me first, if indi	vidual)	***						-					
Bus	siness or Resider	ice Address (N	lumber and	Street, City	, State, Zip	Code)				· - ··		 -			
Nar	me of Associated	l Broker or De	aler		· . <u>.</u> .			_					•	_	
	tes in Which Per (Check "All Sta										.,		[All Sta	ıtes
	(AL) (IL) (MT)	(IN)	[AZ] [IA] [NV]	(AR) (KS) (NH)	[CA] [KY] [NJ]	[CO] [LA] [NM]	[CT] [ME] [NY]	[DE] [MD] [NC]	[DC] [MA] [ND]	[FL] [MI] [OH]	[GA] [MN] [OK]	[HI] [MS] [OR]	[ID] [MO] [PA]		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	answer is "none" or "zero." If the transaction is an exchange offering, check this box [] and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security	Of	gregate fering rice		Amount Already Sold
	Debt	s	0	s	0
	Equity	s	0	s	0
	[] Common [] Preferred		0		0
	Convertible Securities (including warrants)	<u></u>	0	s	0
		·	0	s	0
			finite	\$	9,959,813.06
			finite		9,959,813.06
	Answer also in Appendix, Column 3, if filing under ULOE.	· · · · · · · · · · · · · · · · · · ·			-
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Number avestors		Aggregate Dollar Amount of Purchases
	Accredited Investors		20	_ s	9,959,813.06
	Non-accredited Investors		0	_ \$	0
	Total (for filings under Rule 504 only)			_ \$	
	Answer also in Appendix, Column 4, if filing under ULOE.				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part CQuestion 1.				D. II
	Type of Offering		Type of Security		Dollar Amount Sold
	Rule 505			. s_	
	Regulation A			. \$ _	
	Rule 504			. s _	
	Total			\$_	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to futur contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate	e	_		
	Transfer Agent's Fees		, \$		
	Pinting AFrancis Con				
	Printing and Engraving Costs	·	} \$	_	
	Legal Fees		X] \$		25,000
	Accounting Fees	_	X) \$		130.000
	Engineering Fees	1			
	Sales Commissions (Specify finders' fees separately)	1] \$	_	
	Other Expenses (identify)	1] \$		
	Total	f.S	(I \$		155,000

	b. Enter the difference between the aggregate offering price furnished in response to Part CQuestion 4.a. This difference						************		S <u>Infinite</u>
5.	Indicate below the amount of the adjusted gross proceeds to If the amount for any purpose is not known, furnish an e- payments listed must equal the adjusted gross proceeds to the	stimate and check the	ne box to the left of the esti	imate. Th	e total	shown, of the			
	Salaries and fees			[]	s	Payments to Officers, Directors & Affiliates	()	S	Payments to Others
	Purchase of real estate	.,,,		[]				\$	
	Purchase, rental or leasing and installation of machinery			[]			_	\$	
	Construction or leasing of plant buildings and facilities			[]				s	
	Acquisition of other businesses (including the value of used in exchange for the assets or securities of another is)e	s _		_ []	\$	
	Repayment of indebtedness			[]	s _		_ []	s	
	Working capital			[]	s _		_[]	s	
	Other (specify): Investment in financial instru	nents	*****************************	[]	s		_ [X]	s	Infinite
	Column Totals			[]	s _	· · · · · ·	[X]	s	Infinite
	Total Payments Listed (column totals added)	······			[X]	\$infini	ite		
		D. FEDERAL	SIGNATURE						
und	issuer has duly caused this notice to be signed by the undersigertaking by the issuer to furnish to the U.S. Securities and Exchaccredited investor pursuant to paragraph (b)(2) of Rule 502.								
İssu	er (Print or Type)	Signature	P -+11		Date				
Ana	sazi Market Neutral LP	- Jam	e Leatberberg	,	Μ	arch 2	2		, 2009
	ne of Signer (Print or Type)		ner (Print or Type) Member of Santa Fe Partne	ers LLC.	Genera	l Partner of th	e Issuer	•	

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

